



COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
EMERGENCY OUTREACH BUREAU
CALWORKS MENTAL HEALTH SUPPORTIVE SERVICES

DMH CALWORKS BULLETIN No. 05-05
DPSS DIRECT REFERRALS TO MENTAL HEALTH PROVIDERS

May 25, 2005

NOTE: EFFECTIVE JULY 1, 2006 THE CASC WILL NO LONGER PROVIDE MENTAL HEALTH CLINICAL ASSESSMENTS. THE GSW MAY REFER TO THE CASC STAFF FOR REFERRAL AND LINKAGE TO A PROVIDER OR THEY MAY REFER DIRECTLY.

TO: All DMH CalWORKs Mental Health Supportive Services Providers

FROM: Dolores Daniel, Program Head
CalWORKs Program

SUBJECT: **DPSS DIRECT REFERRALS TO MENTAL HEALTH PROVIDERS**

1. Purpose
2. Background
3. Policy
4. Notification to DMH of Provider Changes
5. Copy of DPSS Administrative Directive 4132, Supp 1 Attached

1. PURPOSE

The purpose of this Bulletin No. 05-05 is to provide information regarding the DPSS Administrative Directive 4132, Supp 1, which contains instructions for GAIN, RITE, and Contracted Case Manager (CCM) staff on direct referrals to CalWORKs directly operated clinics and contract agencies when the Community Assessment Service Centers (CASC) has a backlog of more than two (2) workdays for an emergent assessment or five (5) workdays for a non-emergent clinical assessment appointment.

2. BACKGROUND

DPSS requires that the CASC provide CalWORKs participants with a mental health clinical assessment upon referral. When a GSW contacts a CASC, the CalWORKs participants must be given a clinical assessment appointment within two (2) workdays for emergency or critical mental health issues or within five (5) days for non-emergency mental health issues.

With the enactment of SB 1104 in 2004, DPSS must ensure that CalWORKs participants sign a Welfare-to-Work plan within 90 days after the date of eligibility determination. With participants now being expedited into GAIN, assessments for mental health issues are also expected to be expedited. Further, increasing numbers of CalWORKs participants are being identified with mental health issues and referrals for assessments are likewise increasing.

3. POLICY

DPSS Administrative Directive, Supp 1 details instructions for the GSW when a backlog for mental health clinical assessments by the CASCs exists. If no backlog exists, the GSW will continue to make the appointment directly with CASC staff. The GSW will only contact a mental health provider after contacting the CASC. The GSW is required to maintain documentation of his/her contact with CASC.

4. NOTIFICATION TO DMH OF PROVIDER CHANGES

DMH has provided DPSS with a listing of its CalWORKs directly operated and contract agencies (see Attachment 1 to DPSS Administrative Directive). The list identifies the direct contact person/unit for CalWORKs referrals. DPSS GAIN, RITE, and CCM staff will utilize this list when necessary to make a direct referral to a DMH CalWORKs mental health providers. This list was updated as of April 26, 2005 by telephone contact to each and every DMH CalWORKs mental health providers.

Because DPSS is relying on this list to contact providers, it is important that providers notify DMH of any updates and/or changes to the information on the list. Notification of such changes should be directed to Malik Nasution at (213) 738-4606 or by e-mail at mnasution@dmh.co.la.ca.us.

5. COPY OF DPSS ADMINISTRATIVE DIRECTIVE 4132, SUPP 1 ATTACHED

A copy of the DPSS Administrative Directive #4132 is attached.

DM/dd/lb

DEPARTMENT OF PUBLIC SOCIAL SERVICES ADMINISTRATIVE DIRECTIVE



NUMBER	
4132, Supp. I	05/12/05

**SUBJECT: MENTAL HEALTH CLINICAL ASSESSMENT SERVICES
REFERRAL COORDINATED BY THE GAIN SERVICES
WORKERS/CONTRACTED CASE MANAGERS**

REFERENCE: Administrative Directive No. 4132, dated July 10, 2001

CANCELS: None

FILE IN: EAS 40-100

CANCEL DATE: April 30, 2006

SPECIAL ATTENTION:

☒ CalWORKs
☒ GAIN
☒ ACS, State and Local Solutions, Inc.
☒ MAXIMUS, Inc.
☒ REFUGEE/IMMIGRANT TRAINING AND EMPLOYMENT (RITE)

REPORT REQUIRED [] YES [X] NO
SURVEY REQUIRED [] YES [X] NO

I. PURPOSE/BACKGROUND

This is to provide the Greater Avenues for Independence (GAIN), Refugee/Immigrant Training and Employment (RITE), and Contracted Case Management (CCM) staff revised instructions for coordinating mental health clinical assessment services when there is a backlog of more than two (2) workdays for an emergent assessment or five (5) workdays for a non-emergent clinical assessment appointment.

II. POLICY

Effective immediately, CalWORKs participants identified with a mental health service need will be referred directly to the CalWORKs-contracted mental health service providers for clinical assessment services when the Community Assessment Service Centers (CASC) are unable to provide an assessment within two (2) workdays for an emergent mental health clinical assessment or five (5) workdays for a non-emergent mental health clinical assessment appointment.

II. POLICY (Cont'd.)

Currently, there is no backlog for substance abuse clinical assessment. Therefore, the CASC will continue to be utilized when a participant requires a substance abuse clinical assessment. Additionally, the participants shall travel no more than one (1) hour by bus to the assessment/treatment site.

III. PROCEDURES

GAIN Services Worker (GSW)/RITE Case Manager (RCM)/Contracted Case Manager (CCM)

Upon identification of a GAIN participant with a mental health service need:

- A. Inform the participant that a referral for clinical assessment will be made to further evaluate the participant's mental health service need.
- B. Contact the CASC to schedule an appointment for a mental health clinical assessment per existing procedures in Administrative Directive No. 4132, dated 07/10/01. Select the CASC based on facility location, language capacity, and participant preference.
 1. If the CASC is unable to provide a mental health assessment in two (2) workdays for an emergent assessment or five (5) workdays for a non-emergent clinical assessment appointment:
 - a. Directly contact a CalWORKs-contracted Mental Health service provider as listed on the Los Angeles County Department of Mental Health CalWORKs Directly-Operated and Contract Provider List (Attachment I);
 - b. Speak with either the CalWORKs Liaison, CalWORKs Officer of the Day, CalWORKs Representative or CalWORKs Intake Worker and request a mental health clinical assessment appointment for a CalWORKs GAIN participant;
 - c. Specify that the mental health clinical assessment appointment is for a CalWORKs GAIN participant because the treatment providers provide a variety of services to a number of programs; and

III. PROCEDURES (Cont'd.)

- d. If a direct provider referral for a mental health clinical assessment appointment is not secured after 2 attempts, contact the Department of Mental Health appointment line by calling (213) 738-4606 or (213) 738-4940.
- C. Review GN 6137, Clinical Assessment Activity Agreement form (Attachment II) with participant. Ensure that the participant understands the statement on the GN 6137 that states a direct referral will be made, if the assessment indicates a need for treatment. Obtain participant's signature on GN 6137 and retain in GPRF.
- D. Update GEARS with clinical assessment (001), as appropriate.
- E. Issue the GN 6006A - Page 1, Clinical Assessment Provider Referral, (Attachment III) to the participant and instruct the participant to take the GN 6006A to his/her scheduled clinical assessment appointment.
- F. Fax a copy of the GN 6006A - Page 2, CalWORKs Clinical Assessment Results (Attachment IV), to the CalWORKs contracted service provider site prior to the clinical assessment appointment.
- G. Control for return of the GN 6006A - Page 2, within 3-5 workdays of the direct clinical assessment referral indicating the result of the clinical assessment referral.

IV. GEARS

GAIN Services Worker (GSW)/RITE Case Manager (RCM)/Contracted Case Manager (CCM)

To assign a clinical assessment referral to a CalWORKs-contracted service provider:

- A. Jump to screen "IPCA," enter the participant's case record number.
- B. Jump to "MCSC" and select action code "A" for add.
- C. Jump to "Component Code" and input "001" for Treatment Services activity, press "Enter."

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IV. GEARS (Cont'd.)

- D. Jump to "Session Type" and input "003."
- E. Jump to "Alternate Provider," input "Y" for Yes, press "PF 12" (to go to screen "SSSL").
- F. Enter the city of the CalWORKs-contracted service provider that the participant is being referred to, press "Enter."
- G. Select the appropriate CalWORKs-contracted service provider, as listed in CalWORKs-contracted service provider listing. Jump to the field "Enter Number of Session" and select the corresponding CalWORKs-contracted service provider, press "Enter" (to go back to screen "MCSC").
- H. From the "MCSC" screen, jump to "Appointment/Enrollment Date" field and input scheduled appointment date.
- I. Jump to "Time" field and input starting time of appointment, jump to "Expected Start Date," input scheduled appointment date, jump to "Original Expected End Date," and input same date as scheduled appointment, as clinical assessment is a one day activity.

District/Regional/Contractor Administrative staff may direct questions regarding this material to Jean Dean, CalWORKs Division, Specialized Supportive Services Section, 12820 Crossroads Parkway South, City of Industry, CA 91746.


PHIL ANSELL, DIRECTOR
BUREAU OF PROGRAM AND POLICY

PA:MQ
NM:jd

CLEARANCE/APPROVED:

☒ BPP ☒ BAS ☒ BWS ☒ BSO ☒ OIT
☒ DMH ☒ DHS

Lists I, II, III, & IV

Attachments

Administrative Directive No. 4132, Supp I
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LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH
CalWORKs Directly Operated and Contract Providers, Locations, SPAs Contact List for GAIN

PROVIDER LIST
 SORTED BY SP/SA

Facility Name	Direct Contact Person/Link for CalWORKs Referrals	Direct Contact Phone Number	Address	City	Zip	Main Office Phone Number	Main Office FAX Number	Provider Number
Service Area 1								
Antelope Valley MHS	Kristine Hobbs	(861) 723-4280	348-A EAST AVE. K-8, SUITE A	LANCASTER	93535	(861) 723-4280	(861) 723-6975	1904
Children's Bureau of So. California	Call Inesema Stennette - receptionist	(861) 951-2191	44404 16th STREET WEST, SUITE 208	LANCASTER	93535	(861) 951-2191	(861) 728-8912	7350
Palmdale Mental Health Center	Shella D. Carter, PayD	(861) 575-1800	1529 E. PALMDALE BL., STE. 180	PALMDALE	93550	(861) 575-1800	(861) 537-2832	7388
Pennylane, National Foundation for Treatment	Dannelynn Dorals	(861) 288-4783	180 SIERRA COURT, SUITE C-8	PALMDALE	93550	(861) 288-4783	(861) 288-1210	7455
	Wendy Hammond	(861) 288-4783						
	Sara Cole Receptionist	(861) 288-4783						
San Fernando Valley CMHC: Palmdale	Manuela Diaz 9-2pm Mon-Fri	(861) 288-0474	2181 E. PALMDALE BL. UNIT B	PALMDALE	93551	(861) 288-0474	(861) 288-2857	7389
	Anupama Joshua (Tues, Wed, Th only) for spanish-speaking referrals	(861) 288-0474						
	Larry Shelton	(861) 288-0474						

PROVIDER LIST
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LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH
CalWORKs Directly Operated and Contract Providers, Locations, SPAs Contact List for GAIN

Facility Name	Direct Contact Person/Unit for CalWORKs Referrals	Direct Contact Phone Number	Address	City	Zip	Main Office Phone Number	Main Office FAX Number	Provider Number
Service Area 2								
Child & Family Guidance Center	Penny Greenblatt	(818) 739-6384	9860 ZELZAH AVE	NORTHridge	91325	(818) 983-8311	(818) 700-8834	1875
Child And Family/Newhall-OP	Sally Ibarra, CalWORKs Case Manager	(861) 288-2562 ext. 5009	23504 LYONS AVE. #200	NEWHALL	91321	(861) 288-2560	(861) 288-2567	7413
	Deborah Evans, CalWORKs Coordinator	(861) 288-2562 ext. 5017						
El Centro de Amistad	Victor Checon, Intake worker	(818) 347-8565	6600 OWENSMOUTH AVE. #310	CANOGA PARK	91303	(818) 347-8565 (818) 898-0223	(818) 381-5384	7050
Hillview Mental Health Center, Inc.	Dr. Esther Coleman, Eva McCraven	(818) 898-1181	12450 VAN NUYS BLV. SUITE 200	PACOMA	91331	(818) 898-1181	(818) 898-5069	7088
Institute for Multicultural Counseling and Education Services	Vahmed Cledat	(818) 240-4311	431 N. BRAND BLVD. STE. 202	GLENDALE	91203	(818) 240-4311	(818) 240-4318	7547
San Fernando Mental Health Services	Rod Gabuya	(818) 832-2400	10805 BALBOA BLVD	GRANADA HILLS	91344	(818) 832-2400	(818) 832-2567	8840
San Fernando Valley CMHC, Inc.	Jennifer Stevenson	(818) 838-1352	11566 LAUREL CANYON BLVD., #101	MISSION HILLS	91340		(818) 838-1362	7389
	Letty Cervantes	(818) 838-1352						
	Hugo Torres	(818) 838-1352						
	Anupama Joshua (Mon, Fri only) for spanish-speaking referrals	(818) 838-1352						
San Fernando Valley CMHC: Center for Family Living	Lisa Lipton	(818) 901-4854	14545 SHERMAN CIRCLE	VAN NUYS	91405	(818) 901-4854	(818) 908-4995	7100
San Fernando Valley CMHC: MacDonald Cany OP	Anallisa Garcia (Tu, Th only) for spanish-speaking referrals	(818) 901-4854	11631 VICTORY BLVD., SUITE 203	NO. HOLLYWOOD	91608	(818) 908-3855	(818) 753-5285	7177
	Anallisa Garcia (Mon, Weds only) for spanish-speaking referrals	(818) 908-3855						
Santa Clarita Valley MHC	Ruth Marks	(861) 222-2800	25050 PEACHLAND AVE. STE. 203	NEWHALL	91321	(861) 222-2800	(861) 255-3428	1905
SSG - Asian Pacific Counseling & Treatment Center of San Fernando Valley	Jatu Morino	(818) 287-1108	5900 SEPULVEDA BLVD. #425	VAN NUYS	91411	(818) 287-1108	(818) 287-1199	7382
Siring Behavioral Health Institute	Helen Edmundson	(818) 378-0134	6831 VAN NUYS BLVD., STE 102	VAN NUYS	91405	(818) 378-0134	(818) 378-1437	7481
	Claudia Gomez	(818) 378-0134						
	Agueda Ori, MFT	(818) 287-2739						
	A. Ori's pager	(818) 804-0384						
The Help Group/Child & Family Center	Jaime Karasick, MFT	(818) 287-2781	15339 SATICOY ST.	VAN NUYS	91406	(818) 287-2801	(818) 287-2880	7085
	J. Karasick's pager	(818) 202-2543						
Verdugo Mental Health Center	Jennice Villauer, PhD	(818) 244-7257 ext. 1107	1540 E. COLORADO ST	GLENDALE	91205	(818) 244-7257	(818) 542-3230	1971
West Valley Mental Health Center	Karen Gean	(818) 598-8816	7621 CANOGA AVENUE	CANOGA PARK	91304	(818) 542-3227	(818) 248-0087	8841
WRAP Family Services	Heldi Kwok, MFT	(818) 989-9214, ext 13	6851 LENNOX AVE., #400	VAN NUYS	91405	(818) 598-8900	(818) 598-8971	7378

PROVIDER LIST
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LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH
CalWORKs Directly Operated and Contract Providers, Locations, SPAs Contact List for GAIN

Facility Name	Direct Contact Person/Referral for CalWORKs Network	Local Contact Phone Number	Address	City	Zip	Main Office Phone Number	Main Office FAX Number	Provider Number
Service Area 3								
Arcadia MHS	Dr. Elizabeth Grose	(626) 821-5653	330 EAST LIVE OAK AVE	ARCADIA	91006	(626) 821-5658	(626) 821-0658	1917
D Veal Family and Youth Services	Rafaela Velez, Intake Director	(626) 798-3453 ext 23	855 N. ORANGE GROVE BL, SUITE 207	PASADENA	91103	(626) 798-3453	(626) 798-7082	7341
	Lisa Black (CalWORKS Program Manager)	(626) 744-1904 ext. 22						
	Cynthia Cummings (Case Manager)	(626) 744-1904 ext. 23						
	Juanita McCall (Office Manager)	(626) 744-1904 ext. 33						
	Deann Stales	(626) 744-1904 ext. 24						
ENRd LPV/MHC - La Puente	Call the ENRd Call Center	(626) 227-7018	100 SOUTH SEVENTH AVENUE	LA PUENTE	91744	(626) 981-8971	(626) 981-8885	7173
ENRd Youth and Family Svcs - Covina	Call the ENRd Call Center	(626) 227-7018	535 S SECOND AVE	COVINA	91723	(626) 974-0770	(626) 974-0774	7258
All referrals for Pacific Clinics (except for the Asian Pacific Family Center) should be made to the call center								
Pacific Clinics: ACT Pasadena Project	Call the Pacific Clinics Call Center	(977) 722-2737, then press 3	1007 N. LAKE AVE.	PASADENA	91104	(626) 808-9748		7447
Pacific Clinics: Asian Pacific Family Ctr	Anne Wong	(626) 287-2888	9353 E. VALLEY BLVD	ROSEMEAD	91770	(626) 287-2888	(626) 287-1937	7101
Pacific Clinics: Hudson	Call the Pacific Clinics Call Center	(877) 722-2737, then press 3	70 N. HUDSON AVE	PASADENA	91101	(626) 744-5230	(626) 441-8478	7418
Pacific Clinics: BONITA FAMILY SERVICE CTR (Pomona)	Call the Pacific Clinics Call Center	(877) 722-2737, then press 3	780 E. BONITA AVE.	POMONA	91767	(909) 625-7207	(909) 626-1524	7581
Pacific Clinics: Sierra Family	Call the Pacific Clinics Call Center	(877) 722-2737, then press 3	1160 S. GRAND AVE.	GLENDORA	91740	(626) 335-5980	(626) 335-5989	7380
Pasadena Children's Training Society dba The Sycamores	Patricia Morales, Clinician	(626) 395-7100 Ext.2804	2833 NORTH EL NIDO DRIVE	ALTADENA	91101	(626) 788-0853	(626) 385-7270	7155
	Paul Hodgdon, Director	(626) 395-7100 Ext.2805						
Prototypes-ICAN OP - Pasadena	Sonia Chavez, Intake Coordinator	(626) 577-2261	2656 E. COLORADO BLVD, #100	PASADENA	91107	(626) 577-2261	(626) 577-0408	7370
	Anne Altal, CalWORKS head	(626) 577-2261						
Prototypes-ICAN OP - Pomona	Juan Ramirez, Intake Coordinator	(909) 398-4383 Ext.303	851 E. ARROW HIGHWAY	POMONA	91767	(909) 398-4383	(909) 398-0125	7370
	David Kondo, Clinical Supervisor	(909) 398-4383 Ext.337						

LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH
CalWORKs Directly Operated and Contract Providers, Locations, SPAs Contact List for GAIN

PROVIDER LIST
SORTED BY SPASA

Facility Name	Direct Contact/Referral for CalWORKs Referrals	Direct Contact Phone Number	Address	City	Zip	Main Office Phone Number	Main Office FAX Number	Provider Number
Service Area 4								
1738 House - Family Crisis Center	Gilda Pena	(213) 745-6434	2116 ARLINGTON AVE. STE. 200	LOS ANGELES	90018	(213) 745-6434	(213) 745-6623	7348
Children's Hospital of Los Angeles	Marcela Vazquez, Case Manager, Haleh Homayounjam, Coordinr	(323) 871-3839 (323) 696-2350	5000 SUNSET BLVD, 7TH FL	LOS ANGELES	90027	(323) 696-2350	(323) 871-3843	1899
Children's Institute International	Rebecca Alegria, Site Coordinator Client Services	(213) 385-5100 ext 1858, (213) 385-5100, Ext. 2017	711 S. NEW HAMPSHIRE, #1232	LOS ANGELES	90005	(213) 385-5100	(213) 383-1820	7328
Community Counseling Services Amanecer	Lesbia Hanco, CalWORKs, Case Manager/Outreach services	(213) 481-1347 ext 221	1200 WILSHIRE BL., STE 210	LOS ANGELES	90017	(213) 481-1347	(213) 202-8556	7104
Downtown Mental Health Services	Lisa Wong	(213) 430-0809	529 S. MAPLE ST	LOS ANGELES	90013	(213) 430-0700	(213) 895-8266	7057
End - East LA MHS - Pico Union	Call the End Call Center	(626) 227-7018 (626) 227-1302	2622 W. 7TH ST.	LOS ANGELES	90057	(213) 480-1557		7255
Hollywood Mental Health Center	Cecilia Garcia	(323) 786-2184	1224 VINE STREET	LOS ANGELES	90038	(323) 789-6100	(323) 467-0297	1909
Institute for Multicultural Counseling and Education Services	Cystal Negrete, receptionist	(213) 381-1250	3560 WILSHIRE BL., STE. 2000	LOS ANGELES	90010	(213) 381-1250	(213) 383-4803	7312
Northeast Mental Health Center	Julianne Skilan PSW Luis Suncin	(323) 478-5200 (323) 478-5200	5321 VIA MARISOL	LOS ANGELES	90042	(323) 478-5200	(323) 344-8828	1914
Portals House-CLP/CalWORKs	Dinalba (Dina) Vega	(213) 639-0282	2600 WILSHIRE BLVD STE 430	LOS ANGELES	90057	(213) 639-2588	(213) 385-3467	7512
Seven Generations Center of Family Preservation Services	Jennifer Lingenfelter, CalWORKs Minica Volden, clinical supervisor	(213) 241-0979 (213) 241-0979	1156 WEST 6TH ST	LOS ANGELES	90017	(213) 241-0979	(213) 241-0925	7414
United American Indian Invol Inc	Tina Hummingbird, reception Andi Gonzalez, reception	(213) 241-0979 (213) 241-0979						
SSG - Asian Pacific Counseling & Trnmt Cntr	Jetu Morino	(818) 287-1108	520 LAFAYETTE PARK PL, #300	LOS ANGELES	90057	(213) 553-1850	(213) 553-1854	7186
SSG - Indochinese Counseling Ctr	Jetu Morino	(818) 287-1108	605 W. OLYMPIC BLVD, STE 350	LOS ANGELES	90015	(213) 553-1850	(213) 553-1864	7187

PROVIDER LIST
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LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH
CalWORKs Directly Operated and Contract Providers, Locations, SPAs Contact List for GAIN

Facility Name	Direct Contact Person/Unit for CalWORKs Referrals	Direct Contact Phone Number	Address	City	Zip	Main Office Phone Number	Main Office FAX Number	Provider Number
Service Area 5								
Didi Hirsch CMHC-Culver/Palms	Call Didi Hirsch Call Center	(310) 300-8868	11153 WASHINGTON BL.	CULVER CITY	90232	(310) 885-2300	(310) 885-2365	7357
E. D. Edelmen MHS Adult and Children	Monica Rodriguez-Frison	(310) 988-8500	11080 W. OLYMPIC BLVD. 1ST FL.	LOS ANGELES	90064	(310) 988-8500	(310) 231-0760	1908
	Sylvia Adams	(310) 988-8553						
St. John's Child & Family Dev. Center	Julia Perez Boggs	(310) 829-8561	1339 20TH STREET	SANTA MONICA	90404	(310) 829-8921	(310) 829-8455	7169 & 8773
						(310) 829-8711		
WRAP Family Services	Sylvia Wang, MSW	(310) 337-1550 xl. 202	8818 LA TIJERA BLVD. STE 200	LOS ANGELES	90045	(310) 337-1550	(310) 337-2805	7272
Service Area 6								
Augustus F. Hawkins Comp. MHC	Lisa Nunn	(310) 868-4792	1720 EAST 120TH STREET	LOS ANGELES	90059	(310) 868-4792	(310) 832-3859	8884
Compton Mental Health Center	Ms. Camille Davis	(310) 868-8886	921 EAST COMPTON BLVD. 1ST FL	COMPTON	90221	(310) 868-8800	(310) 868-3474	1838
Didi Hirsch Taper-Manchester Cntr	Call Didi Hirsch Call Center	(310) 300-8868	1838 WEST MANCHESTER AVE.	LOS ANGELES	90044	(323) 778-9583	(323) 778-0028	7423
Kedren Community Mental Health Center, Inc.	Gilda Ruelas	(323) 233-0425, Ext. 365	4211 SOUTH AVALON BLVD	LOS ANGELES	90011	(323) 233-0425	(323) 233-5015	7080
	Tania Coleman	(323) 233-0425, Ext. 368						
LA Child Guidance Clinic	Christal Young	323-766-2345 ext 2002	3767 S VERMONT AVE	LOS ANGELES	90007	(323) 766-2380	(323) 766-2371	8870
LA Child Guidance Clinic - Crenshaw	Christal Young	323-766-2345 ext 2002	4401 CRENSHAW BL	LOS ANGELES	90043	(323) 766-2380	(323) 766-2371	7278
Portals - Community Connections	Wendy Lopez	(323) 200-4347	3031 S VERMONT AVE	LOS ANGELES	90062	(323) 200-4378	(323) 202-9220	7125
South Central Health And Rehabilitation Program (SCHARP) - CalWORKs	Mr. Leslie James	(323) 541-8016	7410 S. BROADWAY	LOS ANGELES	90003	(323) 541-8016	(323) 541-9192	7555
	Robin Molen	(323) 541-8016						
Sheldes For Families (ICS)	call the DPSS Hotline	(323) 756-8837	12714 S. AVALON BL. #106, #900	LOS ANGELES	90061	(323) 777-0130,	(323) 777-0375	7365
						(323) 242-5000		
West Central Family Mental Health*	Dulce Serrano, Case Manager	(323) 298-3880	3751 W. STOCKER ST	LOS ANGELES	90008	(323) 298-3880	(323) 202-0053	1908
	Yolanda Whittington	(323) 298-3837				(323) 298-3837		
Whisper Children's Services DBA Fentury	Errol Thompson, Case Mgr	(323) 290-2525	5022 SOUTH WESTERN AVENUE	LOS ANGELES	90062	(323) 290-2525	(323) 290-2528	7368
	Dolly Harris, Clinician	(323) 290-2525						

**PROVIDER LIST
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**LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH
CalWORKs Directly Operated and Contract Providers, Locations, SPAs Contact List for GAIN**

Facility Name	Direct Contact Person/Unit for CalWORKs Referrals	Direct Contact Phone Number	Address	City	Zip	Main Office Phone Number	Main Office FAX Number	Provider Number
Service Area 7								
ALMA Family Services	Xanli Morales, Intake Coordinator	(562) 801-4628	9140 WHITTIER BLVD	PICO RIVERA	90660	(562) 801-4628	(562) 801-4630	7019
American Indian Counseling Center	Kathleen Geor	(562) 801-4628						
Community Family Guidance Center*	Charlotte Lujan	(562) 402-0677	17707 S. STUDEBAKER ROAD	CERRITOS	90703	(562) 402-0677	(562) 467-7478	7421
Enkid - East LA MHS - Bell Gardens	Kitty Caputo, MFT	(562) 924-5528	10829 SOUTH ST, SUITE 208B	CERRITOS	90701	(562) 924-5528	(562) 924-1040	1977
Enkid - East LA MHS - Bell Gardens	Call the Enkid Call Center	(828) 227-7018	8001 CLARA ST.	BELL GARDENS	90201	(310) 808-5000	(562) 808-8395	7254
Enkid Adult - East LA MHS - Commerce	Call the Enkid Call Center	(868) 227-1302	1436 GOODRICH BLVD	COMMERCE	90022	(323) 725-1337	(323) 278-5344	7253
Enkid ELA Youth & Fam Svcs/Margarita Mendez	Call the Enkid Call Center	(828) 227-7018	1000 GOODRICH BLVD	COMMERCE	90022	(323) 832-9795	(323) 832-9796	7390
Intercommunity Child Guidance Center	Monica Smith, Community Liaison	(562) 692-0383	10155 COLUMA RD.	WHITTIER	90603	(562) 692-0383	(562) 692-0380	1972
Pacific Clinica: El Camino MHC	Kelly Segovia, CW Coordinator	(562) 692-0383						
Rio Hondo Community MHC	Call the Pacific Clinica Call Center	(877) 722-2737, then press 3	11721-A TELEGRAPH ROAD	SANTA FE SPRINGS	90670	(562) 949-8455	(562) 949-4807	7194
Royal Family Mental Health Services	Stephanni Soccon, LCSW	(562) 402-0688	17707 S. STUDEBAKER ROAD	CERRITOS	90703	(562) 402-0688	(562) 402-3032	1930
San Antonio MHC Somos Familia*	Also there is walk-in allowed except on Wednesdays for CalWORKs only	(323) 287-3400	4701 E. CESAR CHAVEZ AVE. (formerly Brooklyn Ave.)	LOS ANGELES	90022	(323) 287-3400	(323) 280-5201	6857
	ask for Clerical Staff	(562) 903-5278	10355 SLUSHER DRIVE	SANTA FE SPRINGS	90670	(562) 903-5085	(562) 941-9165	7488
	Lucy Rivers-Vega, CW Intake	(562) 903-5238						
	Linda Fazio, LCSW							
Service Area 8								
1738 House - Family Crisis Center	Debbie Nelson	(310) 792-5900	601 S. PACIFIC COAST HWY.	REDONDO BEACH	90277	(310) 792-5900	(310) 792-5903	7111
Children's Institute International	Marion Dave	(310) 783-4877 ext. 4217	21910 NORMANDE AVE	TORRANCE	90502	(310) 783-4877	(310) 783-4876	7275
Coastal Asian Pacific MH Services	Yuchal (Winnie) Tso	(310) 217-7312	14112 S KINGSLEY DRIVE	GARDENA	90249	(310) 217-7312	(310) 518-9226	7064
Didi Hirsch Inglewood	Manu Tuhukooki	(310) 217-7316	111 N. LA BREA AVE, STE 201	INGLEWOOD	90301	(310) 877-7808	(310) 877-7205	7209
DMH-Harbor-UCLA Medical Center	Call the Didi Hirsch Call Center	(310) 390-8868	1000 W CARSON ST, BLDG. D-6	TORRANCE	90509	(310) 222-5220	(310) 328-7217	6859
	Veronica Hernandez	(310) 222-3132						
	Tuyet Chen	(310) 222-2612						
	Eileen Masover	(310) 222-1814						
The Guidance Center - Long Beach	call receptionist	(562) 595-1159	3711 LONG BEACH BLVD, STE. 600	LONG BEACH	90807	(562) 595-1159	(562) 981-7589	7433
Long Beach Asian Pacific Mental Health Prog.	Sunly Winkles	(562) 599-9401	1975 LONG BEACH BLVD	LONG BEACH	90808	(562) 599-9401	(562) 218-0402	7207
Long Beach Child & Adolescent Clinic	Vira Duong	(562) 599-9401	240 E. 20TH STREET	LONG BEACH	90808	(562) 599-9274 or (562) 599-9271	(562) 218-4076	1928
Long Beach MHS Adult Clinic	Marla Esquivel	(562) 218-4098						
	Wilfred Paltanwala	(562) 218-6148						
	Robin Ruiz-Ramirez	(562) 218-4093						
Long Beach MHS Adult Clinic	Marla Esquivel	(562) 218-4098	1975 LONG BEACH BLVD	LONG BEACH	90808	(562) 598-9280	(562) 599-3834	1927
	Wilfred Paltanwala	(562) 218-6148						
	Robin Ruiz-Ramirez	(562) 218-4093						
San Pedro Mental Health Services	Call "On-Call" worker	(310) 519-6100	150 WEST 7TH ST	SAN PEDRO	90731	(310) 519-6100	(310) 732-5809	1928
South Bay Mental Health Services	Dr. Seanne Tyson (Tues-Fri only)	(323) 241-6732	2311 WEST EL SEGUNDO BLVD	HAWTHORNE	90250	(323) 241-6730	(323) 758-1183	1935
SSG - Asian Pacific Counseling & Treatment Ctr	Jatu Morino	(818) 287-1108	1040 E. WARDLOW	LONG BEACH	90807	(562) 988-8822	(562) 988-8877	7188
WRAP Family Services	Dana Tekamoto, PsyD	(562) 424-1886	3530 ATLANTIC AVE, STE 202	LONG BEACH	90807	(562) 424-1886	(562) 424-2286	7428
	Vannary Sar, receptionist	(562) 424-1888						

*not taking referrals as of 4/26/05

County of Los Angeles - Department of Public Social Services

CLINICAL ASSESSMENT ACTIVITY AGREEMENT <input type="checkbox"/> MENTAL HEALTH ASSESSMENT <input type="checkbox"/> SUBSTANCE ABUSE ASSESSMENT	Participant Name _____
	Case Name/Number _____
	Social Security Number _____
	GAIN Services Worker Name/ File Number/ Phone _____

☐ My assigned activity is Clinical Assessment for Mental Health.

☐ My assigned activity is Clinical Assessment for Substance Abuse.

My GAIN Services Worker has explained to me that the results of my clinical assessment(s) will be used to determine if I need treatment services as part of my welfare-to-work plan. The plan developed will be to help me achieve the goal of obtaining unsubsidized employment I understand that if I fail to participate as required in this activity, without the county determining good cause for such failure, my cash aid will be lowered.

☐ I understand that if the results of my clinical assessment indicate a need for substance abuse treatment, I will be scheduled by the assessor for mandatory substance abuse treatment

☐ I understand that if the results of my clinical assessment indicate a need for mental health treatment and I choose to participate in mental treatment, I will be scheduled by the assessor for treatment.

SCHEDULE AND LOCATION:

My mental health assessment is scheduled at _____ AM/PM on _____.
My assessment site is located at: _____.

My substance abuse assessment is scheduled at _____ AM/PM on _____.
My assessment site is located at: _____.

SUPPORTIVE SERVICES: Welfare-to-Work will pay for supportive services (child care; transportation; and activity-related expenses) if I need them to participate in Welfare-to-Work and Welfare-to-Work rules allow for them.

I have reviewed my need for Welfare-to-Work supportive services with my GAIN Services Worker. I understand that I do not have to participate until specific arrangements for the supportive services I need have been made. I understand that I must tell my GAIN Services Worker right away of changes in my need for Welfare-to-Work supportive services, or if I no longer need them. If I do not report the changes in advance, Welfare-to-Work may not be able to pay for them. I understand that if Welfare-to-Work pays for supportive services that are more than what I need to participate in Welfare-to-Work, I will have to pay Welfare-to-Work back. I understand that I have three working days to think about the terms of this activity agreement after I sign it. I understand that if I want to change the terms of this agreement, I must tell my GAIN Services Worker by _____. If I do not tell my GAIN Services Worker before then, this agreement is considered final.

CERTIFICATION: I have read (or had read to me) and understand this Activity Agreement, and have received a copy of it. If I fail to meet my responsibilities without a good reason, I know that there are certain penalties and that my cash aid may be affected.

Comments:

Participant's Signature _____	Date _____
GAIN Service Worker Signature _____	Date _____

QN 6137(10198)

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC SOCIAL SERVICES

CalWORKs
CLINICAL ASSESSMENT PROVIDER REFERRAL

(Participant's Name and Address)

(CalWORKs District or GAIN Regional Office)

IMPORTANT APPOINTMENT NOTICE

The following appointment has been scheduled for you to attend a clinical assessment for:

☐ Mental Health☐ Substance Abuse

On: _____ at _____
Date Time

Location:

Address:

Phone#

It is Important For You to Keep This Appointment. Bring This Notice With You.

If, For Any Reason You Cannot Keep This Appointment or Have a Problem, Please Contact Me Immediately.

GAIN Services Worker:	File No:	Telephone # ()
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CalWORKs CLINICAL ASSESSMENT RESULTS

(CalWORKs District or GAIN Regional Office)

Attachment IV

Attention: _____
GSW Name/Number

Section A - Completed by GSW

Participant Name:		CalWORKs Case Number:	
Residence Address:		Mailing Address:	
Primary Language:	Birthdate:	Sex:	() M () F
Telephone Number:		Social Security Number	

Section B - Completed by Assessor (Complete and return to the GAIN Services Worker within 5 days)

Results of the assessment appointment:		Immediate Need <input type="checkbox"/>
<input type="checkbox"/> Participant did not appear/complete the assessment		
<input type="checkbox"/> Participant completed the assessment but does not need a referral for treatment		
<input type="checkbox"/> Participant completed assessment & needs a referral but does <u>not</u> agree to treatment for		<input type="checkbox"/> MH <input type="checkbox"/> SA
<input type="checkbox"/> Participant completed assessment and agrees to recommended treatment for		<input type="checkbox"/> MH <input type="checkbox"/> SA
<input type="checkbox"/> Participant completed assessment does not agree, requests third party assessment.		<input type="checkbox"/> MH <input type="checkbox"/> SA
DIRECT REFERRAL MADE FOR: <input type="checkbox"/> MH <input type="checkbox"/> SA		
<i>(If a direct referral is made fax this form and a copy of the GN 6006B, Service Provider Referral Form to the GSW immediately).</i>		
Comments:		
Assessor:	Facility Name:	Phone

Section C - Completed by GAIN Participant

I authorize the release of information to DPSS regarding the results of my assessment and possible need for treatment services and agree to the service plan developed.	
_____ GAIN Participant's Signature	_____ Date

GN 6006A (Rev 10/98)

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